

COUNTY OF SANTA CRUZ
Unclaimed Money - Claim Form

Return completed form to:
County of Santa Cruz Auditor-Controller's Office
ATTN: Audit Division/Unclaimed Warrants
701 Ocean Street, Room 100
Santa Cruz, CA 95060

Pursuant to California Government Code Section 50052, I wish to file a claim for a previously unclaimed warrant numbered _____ in the amount of \$ _____.
The grounds on which I file this claim are: _____

Vendor or Individual Name (printed)

Telephone Number

Vendor or Individual Name (signature)

Address

City/State/Zip Code

FOR AUDITOR-CONTROLLER'S OFFICE ONLY

Name of Payee: _____

Fund Type/Fund: _____

Original Warrant No. _____ Warrant Date _____ Warrant Amount _____

Replacement Warrant No. _____ Warrant Date _____ Warrant Amount _____

Proof of Identity Verified: Driver's License ____ Social Security Card ____ Birth Certificate ____

Verified By: _____ Date: _____

Approved By _____ Date: _____

COUNTY OF SANTA CRUZ
Unclaimed Money Claim Form - Filing Instructions

STEP #1 Complete all required fields on the Unclaimed Money Claim Form

- Warrant/Check No
- Amount
- Payee Full Name/Business Name, Street Address, City, State, Zip Code
- Daytime Phone
- Vendor or Individual Name (Signature)

The listing of unclaimed warrants published in the newspaper includes the vendor name and the dollar amount of the warrant. To obtain the warrant number please check the more detailed listing of information posted on the Auditor-Controller's County Website at <http://www.co.santa-cruz.ca.us/aud/unclaimedmoney.htm> or if necessary call 831-454-2500 for assistance.

STEP #2 Identification You must also provide the following when filing your claim:

Individual

- A copy of current photo identification for each claimant
- If applicable, verification of address, if mailing address if different from original mailing address or photo identification, such as a utility bill or similar document with your name and that address on it.

Business

- Copy of current photo identification for the authorized agent signing the form
- Letter of Authorization on Company letterhead with the names of officers or officials with authority to sign and claim on behalf of the business
- If your company merged with another company, a copy of the merger agreement;
- If your company was dissolved, a copy of the articles of dissolution.

STEP #3 Mail the completed claim form and required documents:

County of Santa Cruz Auditor- Controller's Office
ATTN: Audit Division/Unclaimed Warrants
701 Ocean Street Room 100
Santa Cruz, CA

When our office receives your completed claim form, we review it carefully. If the evidence is not adequate to prove your ownership or a subsequent payment has been processed, our office will contact you or return all documents submitted, with a letter stating why the claim is incomplete or being denied.

Processing the reissuance of a stale dated check may take up to six months.